

<b>Case Number:</b>	CM13-0052008		
<b>Date Assigned:</b>	06/09/2014	<b>Date of Injury:</b>	05/29/2012
<b>Decision Date:</b>	01/29/2015	<b>UR Denial Date:</b>	10/31/2013
<b>Priority:</b>	Standard	<b>Application Received:</b>	11/15/2013

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. The expert reviewer is Board Certified in Psychologist (PHD, PSYD), and is licensed to practice in California. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/services. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 49 year-old male [REDACTED] with a date of injury of 5/29/2012. The injured worker sustained injury to his psyche as the result of a motor vehicle accident in which his vehicle hit and killed a pedestrian. The injured worker sustained this injury while working as a tow truck driver for [REDACTED]. In his PR-2 report dated 10/21/13, treating Psychologist, [REDACTED] diagnosed the injured worker with Posttraumatic Stress Disorder and Depressive Disorder, NOS. The injured worker has been receiving psychotherapy services from [REDACTED] since June 2012. The request under review is for an additional 6 sessions of psychotherapy.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**Individual psychotherapy (cognitive behavioral therapy) 6 sessions 1 x per weeks:**  
Overturned

**Claims Administrator guideline:** Decision based on MTUS ACOEM Chapter 15 Stress Related Conditions.

**MAXIMUS guideline:** The Expert Reviewer did not base their decision on the MTUS. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) Mental Illness and Stress Chapter.

**Decision rationale:** The CA MTUS does not address the treatment of post-traumatic stress disorder (PTSD) therefore; the Official Disability Guideline regarding the cognitive treatment of PTSD will be used as reference for this case. Based on the review of the medical records, the injured worker has continued to experience psychiatric symptoms related to both PTSD and depression including experiencing suicidal ideation despite participating in psychotherapy with [REDACTED] since June 2012. In his 10/23/13 PR-2 report, [REDACTED] wrote, "Patient initially responded well to CBT and psychotherapy however the past few months his symptoms have been treatment resistant." It is noted that the injured worker had yet to see a psychiatrist for a psychotropic medication evaluation. The ODG indicates that for "Extremely severe cases of combined depression and PTSD may require more sessions if documented that CBT is being done and progress is being made. Psychotherapy lasting for at least a year, or 50 sessions, is more effective than shorter-term psychotherapy for patients with complex mental disorders, according to a meta-analysis of 23 trials. Although short-term psychotherapy is effective for most individuals experiencing acute distress, short-term treatments are insufficient for many patients with multiple or chronic mental disorders or personality disorders." Although the injured worker was no longer demonstrating progress and appeared to manifest treatment resistant symptoms, he was not receiving the most effective combination of treatment for his symptoms since he was not receiving any psychotropic medications in conjunction with CBT. As a result, an additional 6 CBT sessions appears reasonable. As a result, the request for "individual psychotherapy (cognitive behavioral therapy) 6 sessions 1 x per weeks" is medically necessary.